

**PApplication Data Sheet**  
**Application Information**

**Application number::**

**Filing Date::**

**Application Type::** Regular

**Subject Matter::** Utility

**Suggested classification::**

**Suggested Group Art Unit::**

**CD-ROM or CD-R?::** None

**Number of CD disks::**

**Number of copies of CDs::**

**Sequence submission?::** Paper

**Computer Readable Form (CRF)?::**

**Number of copies of CFR::**

**Title::** Systems for Type-Independent Source Code  
Editing

**Attorney Docket Number::** BEAS-1439US1

**Request for Early Publication?::** No

**Request for Non-Publication?::** No

**Suggested Drawing Figure::** 1

**Total Drawing Sheets::** 3

**Small Entity?::** No

**Latin name::**

**Variety denomination name::**

**Petition included?::**

**Petition Type::**

**Licensed US Govt. Agency::** No

**Contract or Grant Numbers::****Secrecy Order in Parent Appl.?::** No**Applicant Information****Applicant Authority Type::** Full Capacity**Primary Citizenship Country::** US**Status::** Inventor**Given Name::** Britt**Middle Name::** Worth**Family Name::** Piehler**Name Suffix::****City of Residence::** Seattle**State or Province of Residence::** WA**Country of Residence::** US**Street of mailing address::** 2452 NW 57<sup>th</sup> Street**City of mailing address::** Seattle**State or Province of mailing address::** WA**Country of mailing address::** US**Postal or Zip Code of mailing address::** 98107**Applicant Authority Type::** Full Capacity**Primary Citizenship Country::** US**Status::** Inventor**Given Name::** Kevin**Middle Name::****Family Name::** Zatloukal**Name Suffix::**

<b>City of Residence::</b>	Cambridge
<b>State or Province of Residence::</b>	MA
<b>Country of Residence::</b>	US
<b>Street of mailing address::</b>	540 Memorial Drive, #1610
<b>City of mailing address::</b>	Cambridge
<b>State or Province of mailing address::</b>	MA
<b>Country of mailing address::</b>	US
<b>Postal or Zip Code of mailing address::</b>	02139
<b>Applicant Authority Type::</b>	Full Capacity
<b>Primary Citizenship Country::</b>	US
<b>Status::</b>	Inventor
<b>Given Name::</b>	David
<b>Middle Name::</b>	Glen
<b>Family Name::</b>	Garber
<b>Name Suffix::</b>	
<b>City of Residence::</b>	Bellevue
<b>State or Province of Residence::</b>	WA
<b>Country of Residence::</b>	US
<b>Street of mailing address::</b>	5015 139 <sup>th</sup> Place SE
<b>City of mailing address::</b>	Bellevue
<b>State or Province of mailing address::</b>	WA
<b>Country of mailing address::</b>	US
<b>Postal or Zip Code of mailing address::</b>	98006

## **Correspondence Information**

**Correspondence Customer Number::** 23910

**Phone number::** (415) 362-3800  
**Fax Number::** (415) 362-2928  
**Email address::** SBachmann@fdml.com

### **Representative Information**

**Representative Customer Number::** 23910

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	An application claiming the benefit under 35 USC 119(e) Provisional	60/449,984	02/26/03

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

### **Assignee Information**

**Assignee Name::** BEA Systems, Inc.  
**Street of mailing address::** 2315 North First Street  
**City of mailing address::** San Jose

**State or Province of mailing address::** CA

**Country of mailing address::** US

**Postal or Zip Code of mailing address::** 95131